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SERIAL NUMBER 10/763,628	FILING OR 371(c) DATE 01/23/2004 RULE	CLASS 424	GROUP ART UNIT 1618	ATTORNEY DOCKET NO. 20030304.0R1
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APPLICANTS

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** CONTINUING DATA *None*

** FOREIGN APPLICATIONS *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **

** 04/29/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 3	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Daedilewski</i> <i>JR</i> Allowance Examiner's Signature Initials				

ADDRESS

23595

TITLE

Abuse potential reduction in abusable substance dosage form

FILING FEE RECEIVED 545	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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